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DATE:	January 28, 2003	No. of Pag	ES (INCLUDING THIS PAGE): 4
FOR:	Examiner Evans		ORIGINAL WILL FOLLOW BY:
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OWO TC.

COMMENTS.		
APPLICANT: G. MOUROU APPLICATION NO. 09/775,106 FILING DATE: 2/1/2001	į	
ENCLOSED ARE THE FOLLOWING FORMS FOR FILING IN THE ABOVE-REFERENCED MATTER:	; ,	
TRANSMITTAL FORM FEE TRANSMITTAL TERMINAL DISCLAIMER TO OBVIATE DOUBLE PATENTING REJECTION OVER A PRIOR PATENT	•	
	:	

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GROUP 1700

h_ 'SB/21 based on PTO/SB/21 (08-00)

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		Application Number	09/775,106						
TRANSMITTAL	•	Filing Date	2-1-2001						
FORM		First Named Inventor	G. Mourou						
: (to be used for all correspondence after li	nitial filing)	Group Art Unit	1725						
		Examiner Name	G. Evans						
Total Number of Pages in This Submission		Attorney Docket Number	2115D-000939/DVC						
ENCLOSURES (check all that apply)									
Fee Transmittal Form		ment Papers Application)	After Allowance Communication to Group						
Fee Aπached	☐ Drawin	g(s)	Appeal Communication to Board of Appeals and Interferences						
Amendment / Response	Licensi	ng-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)						
Atter Final	Petition	ı	Proprietary Information						
Affidavits/declaration(s)		to Convert to a onal Application	Status Letter						
Extension of Time Request		of Attorney, Revocation e of Correspondence Address	Other Enclosure(s) (please identify below):						
Express Abandonment Request	! =	al Disclaimer							
Information Disclosure Statement	CD, Nu	CD, Number of CD(s)							
Certified Copy of Priority Document(s)	Remai	rks							
Response to Missing Parts/ Incomplete Application									
Response to Missing Parts under 37 CFR 1.52 or 1.53									
SIGNA	TURE OF	APPLICANT, ATTORNEY, O							
Firm or Individual name Hamess, Dickey &	Plerce, P.L.	Attorney Name Linda M. Deschere Bryant E. Wade	Reg. No. 34,811 40,344						
Signature Salah Mask									
Date January <u>28</u> , 2003									
CERTIFICATE OF MAILING/TRANSMISSION									
I hereby certify that this correspondence is addressed to: Commissioner of Patents a Trademark Office on the date indicated be	ind Tradema	sited with the United States Post rks, Washington, D.C. 20231, or	al Service as first class mail in an envelope facsimile transmitted to the U.S. Patent and						
Typed or printed name Linda M. Des		E Wade							
Signature	Je.	4 lefe	Date January 28, 2003						

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GROUP 1700

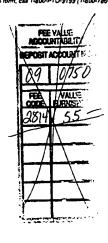
	Complete If Known					
FEE TRANSMITTAL	Application Number	09/775,106				
for FY 2003	Filing Date	2-1-2001				
	First Named Inventor	G. Mourou				
Patent fees are subject to annual revision.	Examiner Name	1725				
Applicant claims small entity status. See 37 CFR 1.27	Group / Art Unit	G. Evans				
TOTAL AMOUNT E PAYMENT (\$) 55	Attorney Docket No.	2115D-000939/DVC				

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (communed)						
				3. ADI	ANOITE	L FEES			
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order			Leres	Entity	Smell I	ntity			
Deposit Accou	int:		1	Fee Code	Fee (\$)	Fee Code	Fee (5)	Fee Description	Fee Pald
Deposit Account	08-0750			1051	130	2051	65	· Surcharge - late filing fee or oath .	
Number	Account 08-0750		1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.		
Deposit			1053	130	1053	130	Non-English specification		
Account Hamass, Dickey & Pierce, P.L.C.			1812	2,520	1812	2,520	For filing a request for reexamination		
Name	as la surbardand for Johns	te att state agenty)	l	1804	920"	1804	920-	Requesting publication of SIR prior to Examiner action	
The Commissioner le suthorized to: (check all that apply) ☑ Charge tee(s) indicated below ☑ Credit any overpayments ☐ Charge any additional fee(s) during the pendancy of this application			1805	1,840	1805	1,840*	Requesting publication of SIR after Examiner action		
Charge fee(s) indicated below, except for the filling fee			1251	110	2251	55	Extension for reply within first month		
to the above-ident	FEE CALCULATION	N .		1252	410	2252	205	Extension for raply within second month	
1. BASIC FIL	NO FEE			1253	930	2253	465	Extension for reply within third month	
Large Entity	Small Entity			1254	1,450	2254	725	Extension for reply within fourth month	
	Fee Foe <u>Fee Descri</u> Code (S)	Fee Paid		1255	1,970	2255	985	Extension for reply within lifth month	
	2001 375 Utility filling i		٦ .	1401	320	2401	160	Notice of Appeal	
	2002 165 Design filling	'-	┥・	1402	320	2402	160	Filing a brief in support of an appual	
	1003 260 Plant filling f		٦	1403	280	2403	140	Request for oral hearing	
1004 750 2	004 375 Reissue filir	eg (de	⇉	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1005 160 2	1005 80 Provisional	IIIIIng fee	۔	1452	110	2452	55	Petition to revive - unavoidable	
·	SUBTOTAL (1)	(\$) 0	٦ .	1453	1,300	2453	660	Petition to revive - unintentional	
	SOBIOTAL (I)	(19)		1501	1,300	2501	650	Utility issue fee (or reissue)	
2. EXTRA CLAIM	FEES			1502	470	2502	235	Design Issue fee	
ļ	Extra	Fee from Fee		1503	630	2503	315	Plant lague fee	
Total Claims	-20 ** = Claims	x Paid	٦ .	1460	130	1460	130	Petitions to the Commissioner	
Independent	⊣""	^ 	╡	1807	50	1807	50	Processing fee under 37 CFR 1,17 (q)	
Claims	-3" = 0	* =	╛	1806	180	1806	160	Submission of Information Disclosure Stmt	
Multiple Dependent Large Entity	· Small Entity	×	_	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
Fee Fee	Foe Fee			1809	750	2809	375	Filing a submission after final rejection	
Code (S)	Code (5) Fee De	scription						(37 ČFR § 1.129(a))	\vdash
1202 18		In excess of 20		1810	750	2810	375	For each additional invention to be examined (37 CFR § 1,129(b))	
1201 84 1203 280		ndent claims in excess of 3 dependent claim, if not pe	ы					* * *	
1203 280	2204 42 Fais	sue independent claims ove		1802	750 900	2801 1802	375 900	Request for Commund Examination (RCE)	<u> </u>
,=-	anginal Rela	sue claims in excess of 20	and	1803	300	1802	800	Request for expedited examination of a design application	
1205 18	CVBF OF	ginal patent		0000	a fener	NA 5704-4	na Die	Haimer	55
SUBTOTAL (2) (5) 0			Other tee (specify) Statutory Disclaimer 55					التا	
			*Reduced by Basic Filing Fee Pald SUBTOTAL (3) (5) 55						
or number prev	or number previously paid, if greater: For Relssues, see above							(6)30	

SUBMITTED BY Complete (# applicable)								
	Unda M. Deschere		34,811					
Name (Print/Type)	Bryant E. Wade	Registration Nor attorney/Agent)	40,344	Telaphone	(248) 641-1600			
Signature	And S	ufache	·	Date	January <u>28</u> 2003			

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This collection of information is required by 37 CPR 1.17 and 127. The information is required to obtain or retain a behefit by the public which is to file (and by the USPTO to process) an application. Confidentiating is governed by 35 U.S.C. 122 and 37 CPR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, propering, and submitting the completed application form to the USPTO. Time will vary depending upon the including case. Any comments on the arround of time you require to complete life form and/or suggestions for reducing this burden, should be sent to the Cellet Information (Pticer, U.S. Petent and Trademark Office, U.S. Department of Commerce, washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, Washington, DC 20231.



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